

ASSEMBLY BILL

No. 635

Introduced by Assembly Member Atkins

February 24, 2015

An act to add Article 4.6 (commencing with Section 14146) to Chapter 7 of Part 3 of Division 9 of the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 635, as introduced, Atkins. Medical interpretation services.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing federal law provides for increased administrative funding for translation and interpretation services provided in connection with the enrollment, retention, and use of services under the Medicaid program.

This bill would require the department to seek federal funding to establish a program to provide and reimburse for certified medical interpretation services, except sign language interpretation services, to Medi-Cal beneficiaries who are limited English proficient. The program would offer medical interpreter services to Medi-Cal providers serving beneficiaries on either a fee-for-service or managed care basis. This bill would specify the requirements for medical interpreter services contracts between the state and health care providers or entities. It would require the department to pursue all available sources of federal funding and federal approvals necessary to implement the bill. The bill also

would require the department to create a community advisory committee to advise on the bill's implementation.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. It is the intent of the Legislature to do all of the
2 following:

3 (a) Create a program to provide reliable access to language
4 interpretation for Medi-Cal beneficiaries who are limited English
5 proficient.

6 (b) Establish a mechanism for accessing federal Medicaid
7 matching funds to provide a majority of the funding for the
8 program.

9 (c) Enable trained interpreters to meet the demand for language
10 services for a significant portion of Medi-Cal beneficiaries with
11 limited English proficiency.

12 (d) Facilitate accurate and timely communication between
13 limited-English-proficient patients and their health care providers,
14 which will improve quality of care, reduce medical errors, increase
15 patient understanding and compliance with health diagnoses and
16 care plans, and reduce the cost of health care by eliminating
17 unnecessary tests and other care.

18 SEC. 2. Article 4.6 (commencing with Section 14146) is added
19 to Chapter 7 of Part 3 of Division 9 of the Welfare and Institutions
20 Code, to read:

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22 Article 4.6. Medi-Cal Medical Interpretation Services

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24 14146. (a) The department shall seek federal funding to
25 establish a program to provide and reimburse for certified medical
26 interpretation services to Medi-Cal beneficiaries who are limited
27 English proficient.

28 (b) The program shall offer medical interpreter services to
29 Medi-Cal providers serving beneficiaries on either a fee-for-service
30 or managed care basis, pursuant to this chapter.

31 (c) A health care provider or entity entering into a Medi-Cal
32 provider agreement or Medi-Cal managed care contract with the
33 state, including Medi-Cal managed care organizations (MMCOs)

1 and their subcontracting plans, and fee-for-service providers, may
2 utilize the program to provide medical interpreter services to
3 Medi-Cal beneficiaries.

4 (d) All contracts between MMCOs and their subcontractors,
5 including health providers and other health plans, shall include
6 provisions describing access to medical interpreter services under
7 the program.

8 (e) The department shall pursue all available sources of federal
9 funding to establish and administer the program and shall seek
10 federal approvals necessary to implement this article.

11 (f) The department shall create a community advisory
12 committee, consisting of stakeholders and health care providers,
13 to advise on the implementation of this article.

14 (g) This article shall not apply to sign language interpretation
15 services.